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I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).							
I hereby appoint:							
Practitioners associated with the Customer Number OR Practitioner(s) named below (if more than ten patent practice)			itioners are to	23524 b be named, the	n a customer numl	ber must be used):	
		Registration Number		Name		Registration Number	
			XX	The state of the s			
as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).							
Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:							
X The add	2352	:4					
OR							
Firm or Individual Name							
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City		State		Zip			
Country	. and Add	Telephone		[Em	all		
Assignee Name and Address:							
Noatak Software, LLC 2215-B Renaissance Drive, Suite 5							
Las Vegas, NV 89119							
USA							
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.							
SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee							
Signature		27	and the second s	Date 02 MAR 2010			
2	dolla eeffalo			Telephone			
Title	Title Authorized Person for Noatak Software, LLC						

This collection of Information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefil by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, Including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

DECLARATION REGARDING AUTHORITY TO SIGN ON BEHALF OF A LEGAL ENTITY 37 C.F.R. 3.73(b)(2)(i)

I, Julia Ceffalo (whose title is supplied below), hereby declare that I am authorized to sign documents on behalf of Noatak Software, LLC.

Julia Ceffalo Authorized Person for Noatak Software, LLC

02 MAR 2010

Date